

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only



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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>5032</u>	2. Fiscal Year Covered From: <u>1/1/05</u> Through: <u>12/31/05</u>
3. Name and address of person filing. Name <u>MARY L TAYLOR.</u> P.O. Box, Bldg., Room No., if any _____ Street <u>11515 51ST AVE N</u> City <u>PLYMOUTH</u> State <u>MINNESOTA</u> ZIP Code + 4 <u>55442</u>	4. Name, file number, and address of labor organization. Name <u>COMMUNICATIONS WORKS OF AMERICA</u> Labor Organization File Number <u>000188</u> P.O. Box, Building and Room Number, if any <u>SUITE 114</u> Street <u>4010 W 65TH ST</u> City <u>EDINA</u> State <u>MINNESOTA</u> ZIP Code + 4 <u>55435</u>
5. Position in labor organization. <u>STAFF REPRESENTATIVE</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>SEE ATTACHMENT</u> Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. <u>SEE ATTACHMENT</u> 7.b. Amount. <u>SEE ATTACHMENT</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Mary L Taylor

On 3-3-06
Date

763 559-3838
Telephone Number

PART A ATTACHMENT

6. Qwest Communications
1801 California Street
Denver, Colorado 80202

7a. Expenses for Union Officer Meeting
sponsored by Company on February 8 – 9, 2005

7b.

Airfare from Minneapolis to Denver round trip	\$259.30
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Hotel Room in Denver (1 night)	\$ 97.76
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Dinner	\$ 40.00
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Lunch	\$ 24.00
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TOTAL	\$421.06
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